	PATENT			N FEE D			ION RECO	RD	19	<u> </u>		G	. :
. CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
FOR			NUMBER FILED			NUMBER EXTRA		_	RATE	FEE	<b>1</b>	RATE	FEE
BASIC FEE			<b>建</b>					7.1		345.00	OR		690.00
TOTAL CLAIMS			9 minus 20=			•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS				3 minus	s 3 =	•			X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT							. 100		1	.000			
* If the difference in column 1 is less than zero, enter "0" in column 2						Ļ	+130=		OR	+260=	160		
/ / / CLAIMS AS AMENDED - PART II								OTAL	L	OR	TOTAL OTHER	690 THAN	
	115/64	(Colur	mn 1)		(C	olumn 2)	(Column 3)	s	MALL	ENTITY	OR	SMALL	
ENT A		REMAI AFT AMEND	INING ER		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	ş	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	. 18	>	Minus			=	,	K\$ 9=		OR	X\$18=	
	Independent	1.4	/	Minus	•••	3	=	;	X39=		OR	X78=	1888
$\vdash$	FIRST PRESE	NIATION	N OF MU	LTIPLE DE	PEND	ENT CLAIM		1	·130=		OR	+260=	
l				•			•	ADI	TOTAL		OR	TOTAL ADDIT FEE	
		(Colur				olumn 2)	(Column 3)	ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
IENT B		(Colur CLAI REMAI AFT AMEND	IMS INING 'ER	ing Comments	PF	Column 2) HIGHEST NUMBER HEVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA			ADDI- TIONAL FEE	OR		ADDI- TIONAL FEE
NDMENT B		CLAI REMAI AFT	IMS INING ER MENT	Minus	PF	HIGHEST NUMBER IEVIOUSLY	PRESENT	F	DIT. FEE	TIONAL	OR OR	ADDIT. FEE	TIONAL
AMENDMENT B	Total Independent	CLAI REMAI AFT AMEND	IMS INING ER DMENT	Minus	PF	HIGHEST NUMBER NEVIOUSLY PAID FOR	PRESENT EXTRA	F	PATE	TIONAL	OR	RATE	TIONAL
AMENDMENT B	Total	CLAI REMAI AFT AMEND	IMS INING ER DMENT	Minus	PF	HIGHEST NUMBER NEVIOUSLY PAID FOR	PRESENT EXTRA	F >>	RATE	TIONAL		RATE  X\$18=	TIONAL
AMENDMENT B	Total Independent FIRST PRESE	CLAI REMAI AFT AMEND	IMS INING ER DMENT	Minus	PF	HIGHEST NUMBER NEVIOUSLY PAID FOR	PRESENT EXTRA	F	RATE (\$ 9= (39= 130=	TIONAL	OR OR OR	RATE  X\$18=  X78= +260= TOTAL	TIONAL
AMENDMENT B	Total Independent FIRST PRESE	CLAI REMAI AFT AMEND	IMS INING ER ER MENT  OF MU	Minus	PEND	HIGHEST NUMBER IEVIOUSLY PAID FOR ENT CLAIM	PRESENT EXTRA	F	RATE (\$ 9= (39= 130=	TIONAL	OR OR OR	RATE  X\$18=  X78= +260=	TIONAL
C AMENDMENT	Total Independent FIRST PRESE	CLAI REMAI AFT AMEND	IMS INING ER PMENT  NOF MU  TO T MU  TO	Minus	PEND	HIGHEST NUMBER IEVIOUSLY PAID FOR ENT CLAIM	PRESENT EXTRA	) +	CATE  C\$ 9=  K39=  130=  TOTAL  DIT. FEE	ADDI- TIONAL	OR OR OR	RATE  X\$18=  X78= +260= TOTAL	TIONAL FEE
C AMENDMENT	Total Independent FIRST PRESE	CLAI REMAI AFT AMEND • ENTATION (Colum CLAII REMAII AFTI	IMS INING ER MENT  OF MU  TO F	Minus	PEND	Olumn 2) IIGHEST OLUMBER EVIOUSLY PAID FOR  ENT CLAIM OLUMN 2) IIGHEST OUMBER EVIOUSLY	PRESENT EXTRA	ADD	CATE  C\$ 9=  K39=  130=  TOTAL  DIT. FEE	TIONAL FEE	OR OR OR	RATE  X\$18=  X78=  +260=  TOTAL ADDIT. FEE	TIONAL FEE
C AMENDMENT	Total Independent FIRST PRESE  Total Independent	CLAI REMAI AFT AMEND  COlun CLAI REMAII AFTI AMENDI  CLAI	IMS INING ER MENT  OF MU  TIN 1) MS NING ER MENT	Minus  JLTIPLE DE  Minus  Minus	PEND	Olumn 2) HIGHEST NUMBER LEVIOUSLY PAID FOR  COLUMN 2) HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA   (Column 3)  PRESENT EXTRA  =	F ADD	RATE (\$ 9= (39= 130= TOTAL DIT. FEE	ADDI- TIONAL	OR OR OR	RATE  X\$18=  X78= +260= TOTAL ADDIT. FEE  RATE  X\$18=	TIONAL FEE
AMENDMENT	Total Independent FIRST PRESE	CLAI REMAI AFT AMEND  COlun CLAI REMAII AFTI AMENDI  CLAI	IMS INING ER MENT  OF MU  TIN 1) MS NING ER MENT	Minus  JLTIPLE DE  Minus  Minus	PEND	Olumn 2) HIGHEST NUMBER LEVIOUSLY PAID FOR  COLUMN 2) HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA   (Column 3)  PRESENT EXTRA  =	ADD	CATE  C\$ 9=  C39=  TOTAL  CATE  C\$ 9=  C\$ 9=  C\$ 9=  C\$ 9=  C\$ 9=	ADDI- TIONAL	OR OR OR OR	RATE  X\$18=  X78=  +260=  TOTAL ADDIT. FEE  RATE  X\$18=  X78=	TIONAL FEE
- AMENDMENT C AMENDMENT	Total Independent FIRST PRESE  Total Independent FIRST PRESE	CLAI REMAI AFT AMEND  (Colum CLAI REMAI AFTI AMEND  • NTATION	IMS INING ER PMENT  I OF MU  I OF MU  I OF MU	Minus Minus LTIPLE DE	PEND  (C PR PR PEND	Olumn 2) IIGHEST NUMBER EVIOUSLY PAID FOR  ENT CLAIM OLUMN 2) IIGHEST NUMBER EVIOUSLY AID FOR  ENT CLAIM	PRESENT EXTRA  (Column 3)  PRESENT EXTRA  =	F ADD	CATE  C\$ 9=  C\$ 9=  TOTAL  DIT. FEE  C\$ 9=  C\$ 9=	ADDI- TIONAL	OR OR OR OR	RATE  X\$18=  X78= +260=  TOTAL ADDIT. FEE  RATE  X\$18=  X78= +260=	TIONAL FEE
AMENDMENT C AMENDMENT	Total Independent FIRST PRESE  Total Independent	CLAI REMAI AFT AMEND  COlum CLAI REMAI AFTI AMEND  The state of the st	IMS INING ER MENT  NOF MU  NOF MU  OF MU  S than the ously Pail	Minus Minus Minus LTIPLE DE	PEND PEND PEND Imn 2, IS SPAIS SPA	Olumn 2) HIGHEST NUMBER LEVIOUSLY PAID FOR  ENT CLAIM OLUMN 2) HIGHEST NUMBER EVIOUSLY PAID FOR  ENT CLAIM OF C	PRESENT EXTRA  =  (Column 3)  PRESENT EXTRA  =  =  tumn 3. n 20, enter *20.* n 3. enter *3.*	F ADD	CATE  C\$ 9=  C\$ 9=  TOTAL  C\$ 9=  C\$ 9=  TOTAL  TOTAL  TOTAL  TOTAL  TOTAL  TOTAL  TOTAL	ADDI- TIONAL FEE	OR OR OR OR OR	RATE  X\$18=  X78=  +260=  TOTAL ADDIT. FEE  X\$18=  X78=  +260=  TOTAL ADDIT. FEE	TIONAL FEE